

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BS	66621	7/3
O.L.P.E. CLASSIFIER		71425	4/27/60
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			6/21/60

INDEX OF CLAIMS

✓ _____ Rejected
 - _____ Allowed
 - (Through numeral) _____ Cancelled
 + _____ Restricted
 N _____ Non-elected
 I _____ Interference
 A _____ Appeal
 O _____ Objected

Claim	Date
1	7/3/60
2	7/3/60
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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